Schedule E)		PAGE 1 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
		M - M / D - D / Y - Y - Y
Check if 24-hour report X 48-hour report New repo	rt Amends report file	
Full Name of Payee Lorri Anderson		Date of Public Distribution/Dissemination
		06 13 2014
Mailing Address 7214 Duchamp Dr		Amount
City State 2	Zip Code	20.00
Charlotte NC	23215	Transaction ID : 4e8ae564-a814-48fb-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	06 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	ce Sought: House District: 00
Ms. Kay Hagan		President State: NC
Calendar Year-To-Date Per Election for Office Sought	Disk 22718.69 2014	oursement For: Primary General  Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Lorri Anderson		06 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7214 Duchamp Dr		Amount
City State	Zip Code	4.50
Charlotte NC	23215	Transaction ID : af0adfba-29f6-4b06-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	06 / 13 / 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 00
Ms. Kay Hagan	✓ Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	22718.69 Disk 201	oursement For: ☐ Primary ☐ General  Other (specify) ▶
( ) OUDTOTAL ( )		
(a) SUBTOTAL of Itemized Independent Expenditures	•••••••••••••••••••••••••••••••••••••••	24.50
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronic Signature	cally Filed] Date	06 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)		71101120		PAGE 2 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Women Speak Out PAC				C00530766
Check if 24-hour report X	18-hour report New re	port Amends repo	ort filed on	/ D = D / Y = Y = Y
	The modification of the mo	Amends repo	Transa on	
Full Name of Payee Lorri Anderson			Date of Public	c Distribution/Dissemination
Mailing Address 7214 Duchamp	Dr		Amount	
City	State	Zip Code		15.00
Charlotte	NC	23215		ID: bdb44244-48c4-407c-b ursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M M M 06	13 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Kay Hagan		X Oppose	President	Senate State: NC
Calendar Year-To-Date Per Election for Office Soug	iht	22718.69	Disbursement For: 2014 Other (sp	Primary X General Decify) ▶
Full Name of Payee			Date of Publi	c Distribution/Dissemination
Lorri Anderson			06	13 2014
Mailing Address 7214 Duchan	np Dr		Amount	
City	State	Zip Code		5.40
Charlotte	NC	23215	Transaction II	D: b1404dd0-294c-4c90-a ursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M 06	13 2014
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Kay Hagan		X Oppose	President	Senate State: NC
Calendar Year-To-Date Per Election for Office Sou	ght	22718.69	Disbursement For: 2014 Other (sp	Primary X General
(a) SUBTOTAL of Itemized Indep	endent Eynenditures			20.40
(a) SOBTOTAL OF REMIZED INDEP	endent Expenditures		7	20.40
(b) SUBTOTAL of Unitemized Inc	lependent Expenditures		. >	
(c) TOTAL Independent Expendit	ures		<b>•</b>	
Under penalty of perjury I certify with, or at the request or suggest party committee) any political part	ion of, any candidate or authorize			
Ms. Emily Buchanan	[Electro	nically Filed] Date	06 16	/ Y Y Y Y Y Y 2014
Signature				

Sch	nedule E)	EXI EIIDI	101120				PAGE 3 FOR SE OF		21 8
	E OF COMMITTEE (In Full)					FEC ID	DENTIFICATIO		
Wo	omen Speak Out PAC						C00530766		
						M = M /	D D /	Y Y Y Y	Υ
Chec	ck if 24-hour report X 48-hour report	X New repo	ort Ame	nds repo	rt filed on				┙
	Full Name of Payee Belinda Blake				Date	of Public	c Distribution/[	Dissemination	
1	Mailing Address 7214 Duchamp Dr.					06	13	2014	Ш
	·				Amo	ount			_
(	- ',		Zip Code					10.0	00
L		NC	28215				ID: 15786bd2 ursement or O		-b
	Purpose of Expenditure Salary		Category/ Type	001		06	13	2014	Y
1	Name of Federal Candidate		Sı	upport	Office Sou	ght:	House [	District: 0	0
	Ms. Kay Hagan		X o	opose	Pres	dent	Senate	State: No	<u> </u>
	Calendar Year-To-Date Per Election for Office Sought		22718.69		Disburseme 2014	ent For: Other (sp	Primary Decify) ▶	X Gen	eral
	Full Name of Payee				Date	e of Publi	c Distribution/I	Disseminatio	on
	Belinda Blake					M M M	13	2014	- Y
	Mailing Address 7214 Duchamp Dr.				A m.	ount			
					Am	ount			_
	City	State	Zip Code					2.70	
	Char	NC	28215		<b>Tran</b> Date	saction II e of Disbu	D: 0f02ee60-4 ursement or O	<b>ba3-42c0-a</b> bligation	ı
	Purpose of Expenditure Mileage		Category/ Type	002		06	13	2014	Y
	Name of Federal Candidate		Sı	upport	Office Sou	ght:	House [	District:C	00
L	Ms. Kay Hagan		Xo	ppose	Pres	ident	Senate	State: No	C
	Calendar Year-To-Date Per Election for Office Sought		22718.69		Disbursem 2014	ent For: Other (sp	Primary Decify) ▶	X Gen	ieral
(a	s) SUBTOTAL of Itemized Independent Expenditures				•			12.70	
(b	o) SUBTOTAL of Unitemized Independent Expenditure	es			· [				
(c	e) TOTAL Independent Expenditures				•		7		
wi	nder penalty of perjury I certify that the independent ith, or at the request or suggestion of, any candidate arty committee) any political party committee or its ag	or authorized							
	Ms. Emily Buchanan	[Electroni	cally Filed]	Date	M M M	16	2014		
	Signature		_				-		

Schedule E)	ENT EXIENT	STICILO	PAGE 4 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	X New re	eport Amends repo	rt filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Ky Broussard			06 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 301 N Cedar Street			Amount
City	State	Zip Code	35.00
Abbeville	LA	70510	Transaction ID : c1fb7481-a623-4162-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 13 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  Other (specify) ▶
Full Name of Payee	_		Date of Public Distribution/Dissemination
Ky Broussard			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 301 N Cedar Street			Amount
City	State	Zip Code	13.50
Abbeville	LA	70510	Transaction ID : ff8fd0ed-1072-493f-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	litures		48.50
(b) CURTOTAL of Unitersized Independent Fun	andika		
(b) SUBTOTAL of Unitemized Independent Expe	enditures		-
(c) TOTAL Independent Expenditures			
	didate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	06 16 7 2014

Schedule E)	TI EXI END			PAGE 5 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Obert 17  Out to 19 10 10 10 10 10 10 10 10 10 10 10 10 10			M	-M / D D / Y Y Y Y
Check if 24-hour report 48-hour report	X New rep	oort Amends repo	ort filed on	
Full Name of Payee Lily Green				of Public Distribution/Dissemination  M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 205 Medallion Circle			Amour	
City	State	Zip Code		30.00
Shreveport	LA	71119		action ID : 6c12fccb-fdad-42f6-8 of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary L Landrieu		X Oppose	Preside	ent Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	25971.23	Disbursement 2014 Of	t For:
Full Name of Payee			Date of	of Public Distribution/Dissemination
Lily Green			M	06 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 205 Medallion Circle			Amou	nt
City	State	Zip Code		13.80
Shreveport	LA	71119		ction ID: 033ee4b7-7007-435a-9 of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		06 13 2014
Name of Federal Candidate		Support	Office Sough	t: House District:00
Ms. Mary L Landrieu		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	25971.23	Disbursemen 2014 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditure	res			43.80
,				7 7
(b) SUBTOTAL of Unitemized Independent Expend	itures		·· •	7 7
(c) TOTAL Independent Expenditures			· .	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Ms. Emily Buchanan	[Electron	nically Filed] Date	e 06	16 2014
Signature				

Schedule E)	PENT EXICINE	TIONES	PAGE 6 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	X New rep	port Amends repo	rt filed on
Full Name of Payee Mr. Michael Vidrine			Date of Public Distribution/Dissemination
Mailing Address 458 Hebert Rd			06
	0	7: 0 1	
City Palmetto	State LA	Zip Code 71358	38.00  Transaction ID : 7af88a04-5fd8-4cd1-8  Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	Date of Disbursement of Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	25971.23	Disbursement For:  Primary  General  General  Other (specify) ▶
Full Name of Payee Mr. Michael Vidrine			Date of Public Distribution/Dissemination
Mailing Address 458 Hebert Rd			06 13 2014 Amount
City	State	Zip Code	22.50
Palmetto	LA	71358	Transaction ID : 9e63dab1-cd45-4c22-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 13 / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Exper	ditures		60.50
(b) SUBTOTAL of Unitemized Independent Exp	penditures		
			7 7
(c) TOTAL Independent Expenditures			<b>&gt;</b>
	ndidate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	nically Filed] Date	06 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S.g. accio			

Schedule E)	LIVI EXI EIVI	DITOTILO	PAGE 7 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	X New re	eport Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Anna Huffman			06 13 / 2014
Mailing Address 70 Westfield Ct.			Amount
City	State	Zip Code	10.00
Gibsonville	NC	27249	Transaction ID : 857ed0ff-0255-4cf9-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 13 / 2014
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Kay Hagan		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		22718.69	Disbursement For:  Primary  General 2014  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Ms. Ashlen Sandoz			06 13 2014
Mailing Address 204 Ranger Place			Amount
City	State	Zip Code	27.50
Slidell	LA	70115	Transaction ID: 62ac263f-0660-4eb4-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 13 2014
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  Gther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expen	ditures		▶ 37.50
(b) SUBTOTAL of Unitemized Independent Exp	enditures		-
(c) TOTAL Independent Expenditures			•
	ndidate or authoriz		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	9 06 16 2014
3.ga.a. 5			

<b>,</b>	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report X 48-hour report New report Amends	report filed on MMM / DDD / YYYYY
Full Name of Payee	Date of Public Distribution/Dissemination
Ms. Tonya Boyd	06 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2357 Fancy Cap Rd	Amount
City State Zip Code	70.00
Mt. Airy NC 27030	Transaction ID: 3400a78f-43f5-4950-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary  Category/ Type	001 06 / 13 / 2014
Name of Federal Candidate Suppo	ort Office Sought: House District: 00
Ms. Kay Hagan Oppos	
Calendar Year-To-Date Per Election for Office Sought 22718.69	Disbursement For: Primary
Full Name of Payee	
Ms. Tonya Boyd	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2357 Fancy Cap Rd	Amount
City State Zip Code	7.50
Mt. Airy NC 27030	Transaction ID: 86ff462b-b1ae-49d7-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage  Category/ Type	002 06 13 / Y Y Y Y
Name of Federal Candidate Suppo	ort Office Sought: House District: 00
Ms. Kay Hagan Oppos	Se President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 22718.69	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	77.50
(b) SUBTOTAL of Unitemized Independent Expenditures	······ <b>&gt;</b>
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or against party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	Date 06 16 2014
Signature	

PAGE

OF

Schedule E)				PAGE 9 OF 21 FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Women Speak Out PAC			C	C00530766
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee Theresa Burkhart			M = M /	Distribution/Dissemination
Mailing Address 3126 Chester Ct			06 Amount	13 2014
City	State	Zin Codo		50.00
Metairie	LA	Zip Code 70006		D: d717e425-9c34-4421-9 rsement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06	13 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose	President >	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	25971.23	Disbursement For: 2014 Other (spe	Primary
Full Name of Payee Mr. Francisco Gonzales	_		Date of Public	Distribution/Dissemination
Ma Para Adda a			06	13 / 2014
Mailing Address 3461 HWY 39			Amount	
City	State	Zip Code		20.00
Braithwaite	LA	70040		: f9a59067-74b4-4693-a rsement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 /	13 / 2014
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		X Oppose	President >	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	25971.23	Disbursement For: 2014 Other (sp	Primary X General
(a) SUBTOTAL of Itemized Independent Expenditure	es		·	70.00
(b) SUBTOTAL of Unitemized Independent Expend	itures		·	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Ms. Emily Buchanan	[Electron	nically Filed] Date	06 / 16	2014

Schedule E)	LIVI EXI EIVI	DITOTILO	PAGE 10 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	X New re	port Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Jeanne Tribou			06 / 13 / 2014
Mailing Address 22369 Ponderosa Dr.			Amount
City	State	Zip Code	30.00
Mandeville	LA	70471	Transaction ID : 2eeee35c-27fa-4fdc-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 13 / 2014
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General  General  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Ms. Laura Jaen			06 13 2014
Mailing Address 821 Honeysuckle St.			Amount
City	State	Zip Code	52.50
Gretna	LA	70056	Transaction ID : 6e837330-a497-4367-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  Gther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expen	ditures		82.50
(I) OUDTOTAL (III II I I I I I I I I I I I I I I I	r.		
(b) SUBTOTAL of Unitermized Independent Exp	enditures		. •
(c) TOTAL Independent Expenditures			<b>•</b>
	ndidate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	9 06 16 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E		in Exi End	TOTLES		PAGE 11 OF 21 FOR SE OF FORM 24/48
	MMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women S	Speak Out PAC				C C00530766
					O cossec. 13
Check if 2	24-hour report X 48-hour report	New rep	port Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name	of Payee ura Jaen			Date of	of Public Distribution/Dissemination
				М	06 13 / Y Y Y Y Y Y
Mailing Ad	dress 821 Honeysuckle St.			Amou	nt
City		State	Zip Code	— r	1.95
Gretna		LA	70056		action ID : 3b20603d-b0b2-43ff-a of Disbursement or Obligation
Purpose o Mileage	f Expenditure		Category/ Type 002		06 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of F	Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary	L Landrieu		Oppose	Preside	
0.01.01.	dar Year-To-Date Election for Office Sought	7	25971.23	Disbursemen 2014 O	t For: Primary ⊠ General ther (specify) ▶
Full Name					of Public Distribution/Dissemination
Ms. Dir	nah Beverly			IV	06 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Ad	ldress 157 Bishop Drive			Amou	
				Amou	nt
City		State	Zip Code		50.00
Avondale		LA	70064	Transa Date	ction ID: 9a8cf2ae-87dd-4796-8 of Disbursement or Obligation
Purpose o Salary	f Expenditure		Category/ Type 001	N	06 / 13 / Y Y Y Y Y
	Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary	L Landrieu		X Oppose	Preside	ent Senate State: LA
	ndar Year-To-Date Election for Office Sought		25971.23	Disbursemen 2014 O	t For:
(a) SUBTO	TAL of Itemized Independent Expendit	ures		>	51.95
(b) SUBTO	TAL of Unitemized Independent Exper	nditures		·· •	
(-) TOTAL	Indicated Eventhings			_	
(C) IUIAL	Independent Expenditures			·· •	7 7 7
with, or at t	Ity of perjury I certify that the independent request or suggestion of, any candittee) any political party committee or	lidate or authorized			
	Ms. Emily Buchanan	[Electron	nically Filed] Date	e 06	16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signatur	е		_		

ooneddie E	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	ate of Public Distribution/Dissemination
Ms. Dinah Beverly	06 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 157 Bishop Drive	mount
City State Zip Code	3.00
Avondale LA 70064 Tr	ransaction ID : 3db27ec2-9cb4-4f98-9 ate of Disbursement or Obligation
Purpose of Expenditure Mileage  Category/ Type  002	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office So	ought: House District: 00
Ms. Mary L Landrieu Pre	esident X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought  Disburser 25971.23  Disburser 2014	ment For: Primary General
Tel Elocater Io. Clinica Goograf	Other (specify)
Full Name of Payee Darius Beverly	late of Public Distribution/Dissemination
Mailing Address 157 Bishop Drive	06 13 2014 mount
City State Zip Code	50.00
Avondale LA 70094 Tra	ansaction ID : 7ef95dbf-8069-49d5-b late of Disbursement or Obligation
Purpose of Expenditure Salary  Category/ Type  001	06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sc	ought: House District: 00
	esident X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought  Disburse 25971.23  Disburse 2014	ement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	53.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date 06	16 2014
Signature	

PAGE 12

OF

Schedule E)	IN EXILIN	STICILO	PAGE 13 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	New re	pport Amends repo	rt filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Darius Beverly			06 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 157 Bishop Drive			Amount
City	State	Zip Code	3.00
Avondale	LA	70094	Transaction ID: e770b6a6-47a6-4148-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General  2014  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Jeanne Tribou			06 14 Y Y Y Y Y
Mailing Address 22369 Ponderosa Dr.			Amount
City	State	Zip Code	30.00
Mandeville	LA	70471	Transaction ID: 135519c0-862c-4949-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	-,,	25971.23	Disbursement For:  Primary  General  General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendi	tures		33.00
			4 1 4
(b) SUBTOTAL of Unitemized Independent Exper	nditures		•
(c) TOTAL Independent Expenditures			
	lidate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	06 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-			

Schedule E)	INI EXI ENL	DITOTILO	PAGE 14 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	New re	port Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Jeanne Tribou			06 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 22369 Ponderosa Dr.			Amount
City	State	Zip Code	1.50
Mandeville	LA	70471	Transaction ID : bff611c3-7c86-40e7-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 / 14 / 2014
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Ralph Smith			06 14 2014
Mailing Address 2090 Fancy Gap Rd			Amount
City	State	Zip Code	60.00
Mt. Airy	NC	27030	Transaction ID : 9f472797-29b5-4fab-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Kay Hagan		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		22718.69	Disbursement For:  Primary  General 2014  General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendit	ures		61.50
(b) SUBTOTAL of Uniternized Independent Expen	ditures		· • · · · · · · · · · · · · · · · · · ·
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authorize		
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	06 16 2014
3. <del>3</del>			

Schedule E)	LNI LXI LN	DITORILO	PAGE 15 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	X New r	eport Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Ralph Smith			06
Mailing Address 2090 Fancy Gap Rd			Amount
City	State	Zip Code	12.00
Mt. Airy	NC	27030	Transaction ID : faf62929-e0c7-4c24-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Kay Hagan		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		22718.69	Disbursement For: Primary General 2014 Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Gregory Green			06 14 2014
Mailing Address 2506 Bolch Street			Amount
City	State	Zip Code	20.00
Shreveport	LA	71104	Transaction ID : ddc4add5-4cc2-469c-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 14 / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	25971.23	Disbursement For:  Primary  General 2014  General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expen	ditures		32.00
			7 7 7 7
(b) SUBTOTAL of Uniternized Independent Exp	enditures		· • · · · · · · · · · · · · · · · · · ·
(c) TOTAL Independent Expenditures			
	ndidate or authoriz		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electr	onically Filed] Date	06 16 2014

Schedule E)	LIVI EXI EIVI	SHORLS	PAGE 16 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	X New re	eport Amends repo	rt filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Gregory Green			06
Mailing Address 2506 Bolch Street			Amount
City	State	Zip Code	8.10
Shreveport	LA	71104	Transaction ID: 89da6e0d-5456-4c07-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For: Primary ☐ General  2014 ☐ Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Lily Green			06 / 14 / 2014
Mailing Address 205 Medallion Circle			Amount
City	State	Zip Code	60.00
Shreveport	LA	71119	Transaction ID : 7c8dab2e-523a-4ebd-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 14 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expen	ditures		68.10
			7 7 7
(b) SUBTOTAL of Unitemized Independent Exp	enditures		•
(c) TOTAL Independent Expenditures			
	ndidate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	06 16 / 2014
-			

Scl	hedule E)	1 1111111111111111111111111111111111111	1101120				PAGE 17 OF 21 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)					FEC ID	DENTIFICATION NUMBER ▼
W	omen Speak Out PAC						C00530766
						M M /	/ D D / Y Y Y Y
Che	eck if 24-hour report X 48-hour report	New repo	oort Am	ends repo	ort filed on	IVI = IVI ,	
	Full Name of Payee Lily Green				Da		c Distribution/Dissemination
-	Mailing Address 205 Medallion Circle					06	14 2014
	205 Medailion Circle				An	nount	
ŀ	City State	,	Zip Code				16.80
	Shreveport LA		71119				ID: 16a302e3-ca5b-410c-a ursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type	002		06 06	14 2014
I	Name of Federal Candidate		<u> </u>	Support	Office So	ught:	House District: 00
	Ms. Mary L Landrieu			Oppose		_	Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		25971.23		Disburser 2014	nent For:	Primary
Ī	Full Name of Payee				Da		c Distribution/Dissemination
	Anna Huffman					M M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ľ	Mailing Address 70 Westfield Ct.						14 2011
					Ar	nount	
ľ	City State	,	Zip Code				30.00
	Gibsonville NC		27249		<b>Tra</b> Da	nsaction II ate of Disbu	D: e5b6a4a9-5c38-4f8f-9 ursement or Obligation
	Purpose of Expenditure Salary		Category/ Type	001		06	14 2014
ľ	Name of Federal Candidate			Support	Office So	ught:	House District: 00
	Ms. Kay Hagan		X	Oppose	Pre	esident	Senate State: NC
	Calendar Year-To-Date Per Election for Office Sought		22718.69	9	Disburser 2014	ment For: Other (sp	Primary X General Decify) ▶
(	a) SUBTOTAL of Itemized Independent Expenditures				·· •	-	46.80
(	b) SUBTOTAL of Unitemized Independent Expenditures				•		1 1 42 1 1 42
,					_		
(	c) TOTAL Independent Expenditures	•••••			· •	7	4
W	Under penalty of perjury I certify that the independent experience or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.	authorized					
	Ms. Emily Buchanan	[Electron	nically Filed]	Date	M M M M M M M M M M M M M M M M M M M	/ 16	/ Y Y Y Y Y Y 2014
	Signature		_				-

Schedule E)	PENT EXI EN	STICILO	PAGE 18 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	X New re	port Amends repo	ort filed on
Full Name of Payee Julie Clifton			Date of Public Distribution/Dissemination
Mailing Address 712 St. Martin Lane			06 / 14 / 2014
			Amount
City	State	Zip Code	28.30
Bossier City	LA	71111	Transaction ID : f3857dda-137a-45e3-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / 14 / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General  General  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Julie Clifton			06 14 2014
Mailing Address 712 St. Martin Lane			Amount
City	State	Zip Code	4.89
Bossier City	LA	71111	Transaction ID : 9dc0ed0e-3113-4333-8  Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 / 14 / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Exper	ditures		. > 33.19
(b) SUBTOTAL of Unitemized Independent Exp	penditures		
			7 7
(c) TOTAL Independent Expenditures			<b>&gt;</b>
	ndidate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	06 16 2014

Schedule E)	JENT EXICITE	ATTOTILES	PAGE 19 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour repor	t New re	port Amends repo	rt filed on
Full Name of Payee Mr. Matthew Beardsley			Date of Public Distribution/Dissemination
			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3683 Olga Lee Drive			Amount
City	State	Zip Code	35.00
Baton Rouge	LA	70816	Transaction ID : 3d9dcee6-3f60-466b-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 14 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General  2014  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Mr. Matthew Beardsley			06 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3683 Olga Lee Drive			Amount
City	State	Zip Code	3.60
Baton Rouge	LA	70816	Transaction ID: 6611f75e-2246-4073-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 / 14 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		25971.23	Disbursement For:  Primary  General 2014  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Exper	nditures		38.60
(b) SUBTOTAL of Unitermized Independent Ex	penditures		<b>•</b>
(c) TOTAL Independent Expenditures			·
	andidate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	nically Filed] Date	06 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	LIVI EXI EN	DITORILO	PAGE 20 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	New re	eport Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
James Tatro			06 D D Z 2014
Mailing Address 1208 Braeburn Rd			Amount
City	State	Zip Code	80.00
Charlotte	NC	28211	Transaction ID : ffcdf79c-d17d-48ce-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Kay Hagan		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		22718.69	Disbursement For:  Primary  General  General  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
James Tatro			06 14 2014
Mailing Address 1208 Braeburn Rd			Amount
City	State	Zip Code	4.80
Charlotte	NC	28211	Transaction ID : fdd753e3-1681-4e2a-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 / 14 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Kay Hagan		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		22718.69	Disbursement For:  Primary  General 2014  Gther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expen	ditures		. ▶ 84.80
//s) CURTOTAL of Heitersized Index and Survey			7 7 7
(b) SUBTOTAL of Unitemized Independent Exp	enaitures		•
(c) TOTAL Independent Expenditures			<b>•</b>
	ndidate or authoriz		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electr	onically Filed] Date	06 16 2014

Schedule E)	iti exi eiti	SHORLS	PAGE 21 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report X 48-hour report	New re	eport Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Belinda Blake			06 16 2014
Mailing Address 7214 Duchamp Dr.			Amount
City	State	Zip Code	20.00
Char	NC	28215	Transaction ID : 2a6f2d9e-5197-40c7-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Kay Hagan		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		22718.69	Disbursement For:  Primary  General 2014  Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Belinda Blake			06 16 2014
Mailing Address 7214 Duchamp Dr.			Amount
City	State	Zip Code	3.90
Char	NC	28215	Transaction ID : a0a4f185-2ac6-4a47-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	06 / 16 / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Kay Hagan		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		22718.69	Disbursement For:  Primary  General 2014  Gther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendit	tures		23.90
			7 7 7
(b) SUBTOTAL of Unitemized Independent Exper	nditures		•
(c) TOTAL Independent Expenditures			1004.74
	idate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electro	onically Filed] Date	06 16 2014
S.g.iataro			